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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/018,046

Filing Date

May 7, 2002

First Named Inventor

Gramnäs

Art Unit

3738

Examiner Name

Alvin J. Stewart

Attorney Docket Number

GRA-101US

ENCLOSURES (Check all that apply)

☐ Fee Transmittal Form

☐ Fee Attached

☒ Amendment / Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/ Incomplete Application

☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify below):

Return Postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Jansson, Shupe, Munger & Antaramian, Ltd.

Signature

John E. Munger

Printed name

John E. Munger

Date

October 3, 2005

Reg. No.

37,685

CERTIFICATE OF TRANSMISSION/MAILING

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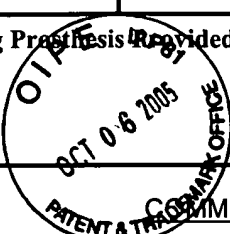


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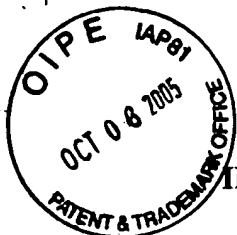
Date

October 3, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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|--|-------------------------------------|-------------------------------------|--|--------------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. GRA-101US | |
| Applicant(s): Gramnäs | | | | | |
| Application No. 10/018,046 | Filing Date 05/07/2002 | Examiner Alvin J. Stewart | Customer No. 24314 | Group Art Unit 3738 | Confirmation No. 6154 |
| Invention: A Device in a Leg Prosthesis Provided with a Foot | | | | | |
|  | | | | | |
| <p style="text-align: center;">COMMISSIONER FOR PATENTS:</p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p> | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 14 - | 23 = | 0 | x \$50.00 | \$0.00 |
| INDEP. CLAIMS | 2 - | 3 = | 0 | x \$200.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> *1 multiple dependent claim | | | | | \$0.00 |
| has already been paid for | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 10-0270</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> | | | | | |
|  Signature | | | Dated: October 3, 2005 | | |
| John E. Munger, Reg. No. 37,685 Jansson, Shupe, Munger & Antaramian, Ltd. 245 Main Street Racine, WI 53403 262/632-6900 | | | <div style="border: 1px solid black; padding: 5px;"> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p> <p style="text-align: center;"><u>October 3, 2005</u></p> <p style="text-align: center;">(Date)</p> <p style="text-align: center;"></p> <p style="text-align: center;">Signature of Person Mailing Correspondence</p> <p style="text-align: center;">Chris Wipper</p> <p style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</p> </div> | | |
| CC: | | | | | |



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Finn Gramnäs

Attorney Docket No. GRA-101US

Serial No. 10/018,046

Group Art Unit: 3738

Filed: May 7, 2002

Examiner: Alvin J. Stewart

Title: A Device In A Leg Prosthesis Provided With A Foot

* * * * *

October 3, 2005

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT
and
SUMMARY OF INTERVIEW

Sir:

This Amendment is responsive to the non-final Office Action mailed July 1, 2005. The Amendment is timely-filed because it is filed on the next business day following the October 1, 2005 due date. 37 C.F.R. § 1.7(a).

After this amendment, claims 3-7 and 9-17 are in the application. Claims 1, 2, 8 and 18-25 are canceled without prejudice.

Kindly amend the application as reflected below:

Amendments to the Claims begin at page 2 of this Amendment.

Remarks/Arguments begin at page 8 of this Amendment.